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02/27/2006

JACOBSON HOLMAN LAW OFFICES PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N. W. **WASHINGTON, DC 20004**

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		
09/901,473	07/10/2001	THIST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/901,4/3		William Michael Raike	P66409US1	55.0
TITLE OF INVENTION D	ICD VOTED LADOL		100403031	5642

ITION: ENCRYPTED MEDIA KEY MANAGEMENT

APPLN. TYPE	SMALL ENTITY	Toolin r	Non-	T				
<u> </u>	SWATER ENTITY	ISSUE F	FEE PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES	\$700)	\$300	\$1000		05/30/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7			
	, KRISTIN M	2132	!	380-277000	J			
 Change of correspondence CFR 1.363). 	ce address or indication of "F	ee Address" (37	2. For pri	nting on the patent front page, li	ist			
Change of correspond	dence address (or Change of 22) attached.	Correspondence	(1) the na or agents	mes of up to 3 registered pater OR, alternatively,	-			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to		sec of up to	Goodwin	Procter,	LLP
Number is required.		e of a Customer	2 registere listed, no	ed patent attorneys or agents. If	no name is 3		····	
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E DD D FEED ALL						

DENCE DATA TO BE PRINTED ON THE PATENT (print or type)

Lehrer

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

Typed or printed name

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

RPK New Zealand Limited

Auckland, NEW ZEALAND

Please check the appropriate assignee category or categories (will not be	pe printed on the patent):
4a. The following fee(s) are enclosed: Size Fee	4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)	(enclose an extra copy of this form).
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
The Director of the USPTO is requested to apply the Issue Fee and Publ NOTE: The Issue Fee and Publication Fee (if required) will not be acces interest as shown by the records of the United States Patent and Tradem	lication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party infark Office.
Authorized Signature Jolo Flebrica	May 2 2006

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Registration No. 56,401

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ADEMARKE			Application	Serial Number	09/901,473	
TRANSMITTAL FORM			Filing Date		1	July 10, 2001
			First Named	Inventor	1	Raike
			Group Art U	Init	1	2132
			Examiner N	ame	1	Derwich, Kristin M.
			Attorney Do	ocket No.	1	SMD-001
			Patent No.			Not applicable
			Issue Date			Not applicable
		ENC	CLOSURES (c	heck all that apply)		
⊠ PT Fo				e to File Missing		Notice of Appeal to Board of Patent Appeals and Interferences
	☑ Check Attached☐ Copy of FeeTransmittal Form		Formal Drawin	ng(s)		Appeal Brief (in triplicate)
	- .		Examination (RCE)			Status Inquiry
	☐ Preliminary ☐ After Final	_	Transmittal		⊠	Return Receipt Postcard
	Affidavits/declaration(s) Letter to Official Draftsperson including Drawings [Total Sheets]	Power of Attorney (Revocation of Prior Powers)			Certificate of First Class Mailing under 37 C.F.R. 1.8	
			Terminal Disc	aimer		Certificate of Facsimile Transmission under 37 C.F.R. 1.8
	Petition for Extension of Time			aration and Power Utility or Design tion		Additional Enclosure(s) (please identify below)
Information Disclosure Statement			Small Entity Statement			
[Form PTO-1449 Copies of IDS Citations		CD(s) for large table or computer program			
	Certified Copy of Priority Document(s)		Amendment After Allowance Request for Certificate of Correction Certificate of Correction (in duplicate)			
	Sequence Listing submission Paper Copy/CD Computer Readable Copy Statement verifying identity of above					
CORRESPONDENCE ADDRESS				SIGNATURE BLO	OCI	
Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414			Respectfully submitted, Date: May 2, 2006 Reg. No. 56,401 Tel. No.: (617) 570-1057 Fax No.: (617) 523-1231 Goodwin Procter LLP Exchange Place Boston, MA 02109			